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<b>DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.53)</b>		Attorney Docket Number		CRD-0903	
		First Named Inventor		Frank Butaric et al.	
		COMPLETE IF KNOWN			
		Application Number			
		Filing Date			
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)		Group Art Unit			
		Examiner Name			
		As a below named inventor, I hereby declare that:  My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:			
EXTENSION PROSTHESIS FOR AN ARTERIAL REPAIR <i>(Title of the Invention)</i>					
the specification of which <input checked="" type="checkbox"/> is attached hereto  OR  <input type="checkbox"/> was filed on (MM/DD/YYYY) <input type="checkbox"/> as United States Application Number or PCT International Application Number <input type="checkbox"/> and was amended on (MM/DD/YYYY)					
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.					
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES      NO	
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.					

# DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
09/714,080	November 16, 2000	Pending
09/714,093	November 16, 2000	Pending
09/714,079	November 16, 2000	Pending
09/714,078	November 16, 2000	Pending

I hereby appoint:

☒ Practitioners at Customer Number **000027777** --

Place Customer  
Number Bar Code  
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AND

☐ Practitioner(s) named below:

Name

Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Carl J. Evens at telephone number (732) 524-2518.

Direct all correspondence to: Customer Number ☒ or Bar Code Label **000027777** OR ☐ Correspondence address below

Name:

Address:

Address:

City:

State:

ZIP

Country

Telephone:

Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Frank

Family Name  
or Surname Butric

Inventor's  
Signature *Frank Butric*

Date

10/29/01

Residence: City Pembroke Pines

State FL

Country USA

Citizenship USA

Mailing Address 12915 N.W. 22nd Manor

City Pembroke Pines

State FL

ZIP 33028

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) William L.

Family Name  
or Surname Howat

Inventor's  
Signature *William L Howat*

Date

10/29/01

Residence: City Weston

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Country USA

Citizenship USA

Mailing Address 16208 Emerald Cove Road

City Weston

State FL

ZIP 33331

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any]) Marc

Family Name  
or Surname Ramer

Inventor's  
Signature *Marc*

Date

10-29-01

Residence: City Weston

State FL

Country USA

Citizenship USA

Mailing Address 1460 Garden Road

City Weston

State FL

ZIP 33226

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Kenneth S.

Family Name

or Surname Solovay

Inventor's

Signature

Date

Residence: City Weston

State FL

Country USA

Citizenship USA

Mailing Address 16732 Diamond Drive

City Weston

State FL

ZIP 33331

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

Family Name

or Surname

Inventor's

Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country

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NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

Family Name

or Surname

Inventor's

Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

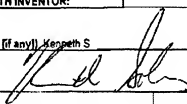
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Kenneth S		Family Name or Surname Solovay	
Inventor's Signature 		Date 01-07-02	
Residence: City Weston	State FL	Country USA	Citizenship USA
Mailing Address 16732 Diamond Drive			
City Weston	State FL	ZIP 33331	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country
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NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country